

POSITION	INITIALS	ID NO.	DATE
<b>BEST AVAILABLE COPY</b>			
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	DM	70223	11-16-00
RESPONSE FORMALITY REVIEW			1/3/01

**INDEX OF CLAIMS**

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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